

CABINET FOR HEALTH AND FAMILY SERVICES

COMMONWEALTH OF KENTUCKY

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January 23, 2004

Nursing Facility Provider Letter # A-200

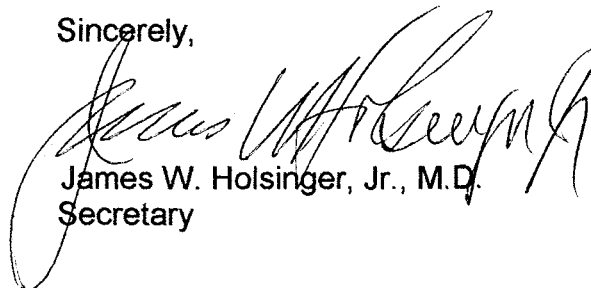
Dear Nursing Facility Provider:

Effective immediately, the Department for Medicaid Services has deleted the requirement for level of care recertification upon readmission to a nursing facility when a resident has left the facility due to an acute care hospital stay for three (3) or more days.

Please see the attached revisions made to the Nursing Facility Services Manual, Section III K, pages 3.5 and 3.6. Please delete the former pages in your Manual and replace them with the attached revised pages.

Should you have any questions or need further clarification, please contact Benjamin R. Sweger, Director, Division of Long Term Care & Disability Services at (502) 564-7540.

Sincerely,



James W. Holsinger, Jr., M.D.  
Secretary

Attachment

JWH/jm

CABINET FOR HEALTH SERVICES  
DEPARTMENT FOR MEDICAID SERVICES  
NURSING FACILITY SERVICES MANUAL

SECTION III – CONDITIONS OF PARTICIPATION

Prior to admission of an individual to a nursing facility, the facility must request certification from the PRO. Certification for a new admission of an individual must be requested within seven (7) working days of the admission. (This seven (7) day time frame is a maximum limit. PRO certification should be requested prior to admission. If an individual is discharged prior to a request for certification, a certification shall not be approved).

If an individual is admitted after normal business hours or on a weekend, request for certification by the PRO may be obtained through use of the MAP-726. The MAP-726 may be faxed to the PRO at 502-429-5233. Keep a copy of the transmission form generated that indicates the transmission was successful. The nursing facility provider will need this documentation if problems arise concerning the faxed transmission. The MAP-726 may also be used during normal business hours. (A copy of the MAP-726 is located in the Appendix of this manual).

Should a provider admit an individual who does not meet nursing facility level of care certification requirements, DMS will not be responsible for costs associated with individual's care while in the facility. Failure to request PRO review within seven (7) working days of a new admission, changes in payer sources, or changes in patient conditions is a failure to comply with Medicaid policy.

In addition, no provision is made in the regulations or manuals for granting retroactive certifications or exceptions. As an entity of state government, the Department for Medicaid Services is obligated to comply with governing regulations. In addition, providers are subject to provisions in 907 KAR 1:671, 907 KAR 1:672, and 907 KAR 1:673.

1. PRO Process for Nursing Facilities: Prior to admission of an individual to a nursing facility, the facility shall request certification of the admission by the PRO. The PRO shall

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SECTION III – CONDITIONS OF PARTICIPATION

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approve the admission and transmit to the facility and the local Department for Community Based Services office a "Confirmation Notice", or deny the admission and issue an "Initial Determination Notification." The PRO shall submit the Initial Determination Notification to the patient or their responsible party, the physician of record, the facility, and the local Department for Community Based Services office.

If the admission is approved, within thirty (30) days of the admission the PRO shall perform an on site continuing stay review. The PRO shall approve a continued stay if the resident continues to meet the nursing facility level of care criteria in accordance with 907 KAR 1:022. If the resident no longer meets the nursing facility level of care criteria in accordance with 907 KAR 1:022, the PRO shall issue an "Initial Determination Notification."

Specific lengths of stay shall not be assigned for continued stays. The PRO reviewer shall re-certify each resident in the facility for a continued stay or deny the continued stay and issue an "Initial Determination Notification" every six (6) months.

It is incumbent upon nursing facilities with a Medicaid waiver of the nurse staffing requirement to discharge the resident when the resident's status changes from nursing facility level of care services to skilled nursing care services during the periods between PRO reviews.

2. PRO Process for Licensed Swing-Bed Nursing Facilities: Prior to admission of an individual to a swing bed nursing facility, or prior to changing the bed from acute care status, if the resident was admitted to the swing bed as an acute care patient, the facility shall request certification by the PRO. The PRO shall approve or deny the admission using the same Department for Medicaid Services criteria as for nursing facilities.